

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Waste Management Employees Better Government Fund**

Full Name (Last, First, Middle Initial)

**A. Brenda Lawrence For Congress**

Mailing Address P O Box 760550

City Southfield State MI Zip Code 48076

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Brenda Lawrence**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			16			2013			

**Transaction ID : 4072077**

Amount of Each Disbursement this Period

1000.00
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Contribution

Full Name (Last, First, Middle Initial)

**B. Berger for Congress**

Mailing Address PO Box 3117

City Eden State NC Zip Code 27288

Purpose of Disbursement  
Contribution

011

Candidate Name

**Phil Berger Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2013			

**Transaction ID : 4074442**

Amount of Each Disbursement this Period

500.00
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Contribution

Full Name (Last, First, Middle Initial)

**C. Alma Adams For Congress**

Mailing Address PO Box 20622

City Greensboro State NC Zip Code 27420

Purpose of Disbursement  
Contribution

011

Candidate Name

**Alma Adams**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2013			

**Transaction ID : 4074443**

Amount of Each Disbursement this Period

500.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2000.00
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